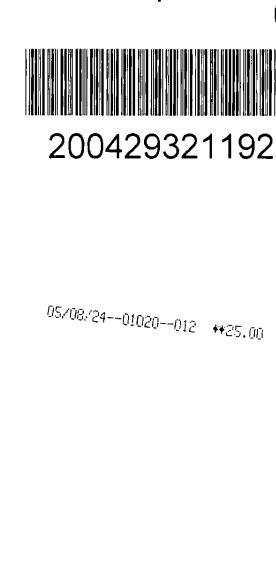
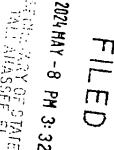
124 000 172 145



(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP ☐ WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status ___ Special Instructions to Filing Officer:

Office Use Only



COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divi	ision of Corp	porations			
our incr	H&H Techr	nical Industries LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		Ryan Hartman			
			Name of Person		
		H&H Technical Industries	HC		
			Firm/Company		
		7228 Clarcona-Ococe Rd.,			
		7228 Clarcolla-Ococe Rd.,	Address		
			Address		
		Clarcona, FL 32710			
		Pandel444@Gmail.com	City/State and Zip Code		
		~	to be used for future annual report r	notification)	
For further in	iformation co	oncerning this matter, please ca	all:		
Ryan Hartma	an		407 437-3906		
Name of Person		at () Area Code Day	time Telephone Number		
		e following amount:	-		
≡ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Section			
Div	ision of Co	orporations	Division of C	Corporations	
r.U). Box 632°	ſ	The Centre of Tallahassee		

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

H&H Technical Industries LLC					
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) oility Company)				
The Articles of Organization for this Limited Liability Company were filed on April 11, 2024					
Florida document number L24000172165					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabilit	y company here:				
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre	viation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	202			
<u> </u>	<u> </u>	<u> </u>			
	<u> </u>				
Enter new mailing address, if applicable:	35.7	∞ I <u>⊸ П1</u>			
(Mailing address MAY BE A POST OFFICE BOX)	m co	man 3 D			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) R. If amonding the registered agent and/or registered office address on our records, enter the purpose.	ω				
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	lress on our records, enter the name o	of the new regist			
	Enter Florida street address				
	Florida	Zip Code			
ida document number L24000172165 amendment is submitted to amend the following: If amending name, enter the new name of the limited liability companies name must be distinguishable and contain the words "Limited Liability Companier new principal offices address, if applicable: Incipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: It iling address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address ontand/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	CHV	ZID Code			

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ryan Hartman	7228 Clarcona-Ococe Rd., Unit 923	= Add
		Clarcona. FL 32710	□Remove
			□Change
AMBR	Ryan Hartman	7228 Clarcona-Ococe Rd Unit 923	≣ Add
		Clarcona, FL 32710	□Remove
		 	□Change
	 		□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Change

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ffective date, if other than	the date of filing:	:	(optional)	
an effective date is listed, the date ote: If the date inserted in thi ocument's effective date on the	must be specific and c s block does not me	cannot be prior to date of eet the applicable statt	filing or more than 90 days	s after filing.) Pursuant to 60)5.0207 (sted as t
record specifies a delayed effe is filed.	ctive date, but not a	in effective time, at 12	2:01 a.m. on the earlier of	of: (b) The 90th day after	er the
is filed.					
ated April 26		2024			
	1 n.	<i>I</i>			
// /					

Typed or printed name of signee